DEPARTMENT USE ONLY:					
Ref No.	Rel No.	C/R No.	Date Proc.		

## STATE OF NEW JERSEY DEPARTMENT OF BANKING and INSURANCE

OFFICE OF ADMINISTRATION AND FINANCE LICENSING SERVICES BUREAU PO Box 473 Trenton, NJ 08625

## LICENSED LENDERS INDIVIDUAL APPLICATION

INDICATE AUTHORITY(ies):  Mortgage Banker Mortgage Broker Correspondent Mortgage Banker Secondary Mortgage Lender				
YOU MUST INDICATE HERE WHETHER YOU HAVE EVER HAD A LICENSE ISSUED BY THIS DEPARTMENTYESNO				
Nam	e:		Male Female	
Employing Company:				
Are you the officer or member of your firm who is to be the LICENSED INDIVIDUAL OF RECORD?  Yes No Additional licensee  LIST EMPLOYMENT HISTORY FOR THE PAST FIVE YEARS				
	NAME	ADDRESS	DATES	
1. Have you been indicted, arrested or convicted (other than for motor vehicle violations) of any offense, crime or misdemeanor in this state, any other state, or by the federal government, or are you presently under investigation or on probation or parole? Yes No				
1	Have you ever had a license, or right to engage in this or any other business or profession, penalized, revoked, denied, suspended, restrained by any agency of this state, any other state, or the federal government? YesNo			

3.	Have you ever filed a petition in bankruptcy or reorganization or been affiliated with an entity that has filed a petition in bankruptcy or reorganization? Yes No If yes, give particulars on a separate schedule including date of bankruptcy and copy of discharge, if applicable.				
4.	Within the past two years, have you been involved as a defendant in any litigation concerning the licensed business? Yes No				
5.	Are you the subject of an arrest warrant for failing to comply with court ordered child support obligations Yes No Are you in arrears on such obligations for a period of six months or more? Yes No				
6.	If you answered Yes to any of the above questions, provide detailed explanation and attach copies of any applicable documentation.				
	INDIVIDUAL	L CERTIFICATION			
of len mi	my knowledge and belief. This application is mader individual license and I understand that any ir	lepose and say that the answers set forth are true to the best de for the purpose of inducing the issuance of a licensed information withheld or which represents a material this application by the Commissioner of Banking and			
 Pri	int Full Name				
Sig	gnature	Date			
Sul	bscribed and sworn to before me at				
this	sday of20_				
	(Official Title)				
	EMPLOYER	R CERTIFICATION			
Th	is is to certify that	is authorized to apply for a			
Lio	(Name of Applicant) censed Lender Individual license in my employ.				
		Signature of Corporate President, Partner or Sole Proprietor			
		Date			